2014 SNP Quality Improvement Program Matrix Upload Document

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Quality Improvement Program Plan
In the following table, list the document, page number, and section of the corresponding description of your quality improvement program components in your written plan.

Quality Improvement Program Components	Corresponding Document Page Number/Section

1. Description of the SNP-specific Target Population
 	
  a. Identify the SNP-specific target population (e.g., Medicaid subset D-SNP, institutional equivalent individuals enrolled in I-SNP, diabetes C-SNP, or chronic heart failure/cardiovascular C-SNP)
 	
  b. Describe the purpose of the quality improvement program in relation to the target population
 	
  c. Describe how the MAO identifies and monitors the most vulnerable members of the population (i.e., frail, disabled, near the end-of-life, multiple or complex chronic conditions, or developing ESRD after enrollment) and the quality improvement activities designed for these individuals.
 	
  d. Outline the components of the overall quality improvement program including the MAO's internal activities and the following CMS required activities:
 	
    • Health information system to collect, analyze, and report accurate and complete data
    • MAO-determined internal quality improvement activities
    • Chronic care improvement program (one or more)
    • Quality improvement project (one or more)
    • Measurement of the effectiveness of the SNP model of care, indices of quality, and beneficiary health outcomes
    • Collection and reporting of HEDIS measures (NCQA)
    • Collection and reporting of Structure and Process measures (NCQA)	

• Participation in HOS survey if enrollment meets threshold (NCQA) • Participation in CAPHS survey if enrollment meets threshold (Wilkerson & Associates) • Collection and reporting of Part C Reporting Elements (HPMS) • Collection and Reporting of Part D Medication Therapy Management data	

2. Health Information System
 	
a. Describe the health information system and how the system enables the MAO to:
 	
   • Collect, analyze, and integrate data to conduct the quality improvement program
   • Ensure that data is accurate and complete
   • Maintain health information for CMS review as requested
   • Conduct annual review of the MAO's overall quality improvement program
   • Take action to correct problems revealed through complaints and quality improvement activities
b. Describe how the MAO manages the health information system to comply with HIPAA and privacy laws, and professional standards of health information management	

3. MAO-determined Internal Quality Improvement Activities a. Describe the quality improvement activities the MAO has designed that address the target population and are not specifically required by CMS. b. Describe how the MAO maintains documentation on internal quality improvement activities and makes it available to CMS if requested.	
4. Chronic Care Improvement Program (CCIP) a. Describe the chronic care improvement program(s) and how CCIP(s) relate to the SNP target population b. Describe how the MAO identifies SNP beneficiaries who would benefit from participation in the CCIP(s) c. Describe how the MAO monitors the beneficiaries who participate in the CCIP(s), and how it evaluates the health outcomes, quality indices, and/or improved operational systems post-intervention.	

5. Quality Improvement Projects (QIP)
 	
a. Describe the quality improvement project(s) and how QIP(s) relate to the SNP target population including:
 	
   • Clearly defined objectives
   • Interventions for SNP target population
   • Quality indices and health outcomes written as measureable outcomes
b. Describe how the MAO identifies SNP beneficiaries who would benefit	

from participation in the QIP(s) c. Describe how the MAO monitors the beneficiaries who participate in the QIP(s) d. Describe how it evaluates the health outcomes, quality indices, and/or improved operational systems post-intervention, and achieves demonstrable improvement e. Describe how the MAO conducts systematic and periodic follow-up to assure improvements are sustained	

6. SNP-specific Care Management Measurement
 	
a. Describe how the MAO will evaluate the effectiveness of its model of care including:
 	
    • Methodology
    • Specific measurable performance outcomes that demonstrate improvements (e.g., access to care, beneficiary health status, staff structure and performance of roles, health risk assessment and stratification of identified needs, implementation of care plans, adequacy of provider network, use of clinical practice guidelines by providers, adequacy of the provider network, etc.)
b. Describe how the MAO maintains documentation on model of care evaluation and makes it available to CMS as requested and during onsite audits.
 	
c. Describe how the MAO determines what actions to take based on the results of its model of care evaluation.	

7. HEDIS and Structure & Process Measures (NCQA) a. Describe how the MAO collects and reports the required HEDIS measures and Structure & Process measures to NCQA (Note: SNPs having 30 or more enrolled members are required to report these measures) b. Describe how the MAO assures accuracy of HEDIS and Structure & Process measures. c. Describe how the MAO determines what actions to take based on the results of HEDIS data and Structure & Process measurement.	
8. Health Outcomes Survey - HOS (NCQA) a. Describe how the MAO participates in reporting HOS (Note: MAOs having 500 or more enrolled members are required to report HOS information) b. Describe how the MAO determines what actions to take based on the HOS survey results.	

9. Consumer Assessment of Healthcare Providers and Systems – CAHPS Survey (Wilkerson & Associates)
 	
  a. Describe how the MAO participates in reporting CAHPS (Note: MAOs having 600 or more enrolled members are required to report CAPHS information)
 	
  b. Describe how the MAO determines what actions to take based on the CAHPS survey results.	

10. Part C Reporting Elements
 	
  a. Describe how the MAO collects, analyzes, and reports Part C reporting data elements to CMS.
 	
  b. Describe how the MAO assures accuracy of Part C reporting data elements.
 	
  c. Describe how the MAO determines what actions to take based on the results of Part C reporting data elements.	

11. Part D Medication Therapy Management Reporting
 	
  a. Describe how the MAO collects, analyzes, and reports Medication Therapy Management measures to CMS.
 	
  b. Describe how the MAO assures accuracy of Medication Therapy Management measures.
 	
  c. Describe how the MAO determines what actions to take based on the results of Medication Therapy Management measurement.	

12. Communication on Quality Improvement Program with Stakeholders
 	
  a. Describe how the MAO will facilitate the participation of providers, the interdisciplinary care team, and beneficiaries/caregivers in its overall quality improvement program.
 	
  b. Describe how the MAO will communicate improvements in care management resulting from its overall quality improvement program to all stakeholders (e.g., a webpage for announcements, printed newsletters, bulletins, announcements, etc.)
 	
  c. Describe how the MAO maintains documentation on its overall quality improvement program and makes it available to CMS as requested and during onsite audits.	